

AO 440 (Rev. 05/00) Summons in a Civil Action

UNITED STATES DISTRICT COURT

RECEIVED
JUDICIAL DISTRICT OF ILLINOIS
STATE OF ILLINOIS

JAN 23 2008

DEPT. OF INSURANCE
CHICAGO, ILLINOIS

SUMMONS IN A CIVIL CASE

THERESA THOMPSON,

CASE NUMBER: 08 C 439

V.

ASSIGNED JUDGE: Castillo

LONG TERM DISABILITY PLAN FOR EMPLOYEES
OF MOLEX, INC., CIGNA GROUP INSURANCE and
LIFE INSURANCE COMPANY OF NORTH AMERICA.

DESIGNATED
MAGISTRATE JUDGE: Brown

TO: (Name and address of Defendant)

CIGNA GROUP INSURANCE
c/o Illinois Department of Financial and Professional Regulation
Division of Insurance
James R. Thompson Center
100 W. Randolph St., Suite 9-301
Chicago, IL 60601-3395

YOU ARE HEREBY SUMMONED and required to serve upon PLAINTIFF'S ATTORNEY (name and address)

David A. Bryant
Daley, DeBofsky & Bryant
55 W Monroe St Ste 2440
Chicago, IL 60603

an answer to the complaint which is herewith served upon you, within 20 days after service of this summons upon you, exclusive of the day of service. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint. You must also file your answer with the Clerk of this Court within a reasonable period of time after service.

MICHAEL W. DOBBINS, CLERK

Yvette Montanez
(By) DEPUTY CLERK

JAN 22 2008

DATE

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RETURN OF SERVICE		
Service of the Summons and complaint was made by me ⁽¹⁾	DATE <u>1/23/2008</u>	
NAME OF SERVER (PRINT) <u>ELINOR HART</u>	TITLE <u>Office Assistant</u>	
Check one box below to indicate appropriate method of service		
<input checked="" type="checkbox"/> Served personally upon the defendant. Place where served: <u>Illinois Division of</u> <u>Insurance</u>		
<input type="checkbox"/> Left copies thereof at the defendant's dwelling house or usual place of abode with a person of suitable age and discretion then residing therein. Name of person with whom the summons and complaint were left: _____		
<input type="checkbox"/> Returned unexecuted: _____ _____ _____		
<input type="checkbox"/> Other (specify): _____ _____ _____		
STATEMENT OF SERVICE FEES		
TRAVEL _____	SERVICES _____	TOTAL _____
DECLARATION OF SERVER		
<p>I declare under penalty of perjury under the laws of the United States of America that the foregoing information contained in the Return of Service and Statement of Service Fees is true and correct.</p>		
Executed on <u>1/23/2008</u> <u>[Signature]</u> <div style="display: flex; justify-content: space-between;"> Date Signature of Server </div>		
<u>55 W. Monroe, 8th 2440 Chicago</u> <div style="display: flex; justify-content: space-between;"> Address of Server "IL 60603" </div>		

(1) As to who may serve a summons see Rule 4 of the Federal Rules of Civil Procedure.